

Political Organization  
Notice of Section 527 Status**Part I** General Information

1 Name of organization <b>FRIENDS OF BEN WACKSMAN FOR COUNTY</b>		Employer identification number <b>59:3660719</b>
2 Mailing address (P.O. Box or number, street, and room or suite number) <b>P.O. BOX 18604</b> <b>COMMISSIONER</b>		
City or town, state, and ZIP code <b>TAMPA, FL 33679</b>		
3 E-mail address of organization <b>BEN@VOTEWACKSMAN.COM</b>		
4a Name of custodian of records <b>BEN WACKSMAN</b>	4b Custodian's address <b>SAME</b>	
5a Name of contact person <b>BEN WACKSMAN</b>	5b Contact person's address <b>SAME</b>	
6 Business address of organization (if different from mailing address shown above). Number, street, and room or suite number		

City or town, state, and ZIP code

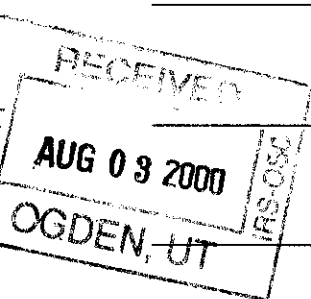
**Part II** Purpose

7 Describe the purpose of the organization

Political campaign for BEN WACKSMAN to be elected to the Hillsborough County Commission, District 1

**Part III** List of All Related Entities (see instructions)

8a Name of related entity	8b Relationship	8c Address



9a Name

9b Title

9c Address

BEN WACKSMAN

Candidate

PO Box 18604  
TAMPA, FL 33679

Michael Raymonds

Treasurer

SAME

JONATHAN BRILL

Deputy  
TREASURER

Same

**Sign  
Here**

Under penalties of perjury, I declare that the organization named in Part I is to be treated as an organization described in section 527 of the Internal Revenue Code, and that I have examined this notice, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete.

Signature of authorized official

Date \_\_\_\_\_

